

Camp Escape

Summer Camp Program Satisfaction Survey

The information given within this survey is important to the Greenville Recreation and Parks Department and will provide the department with feedback to repeatedly offer high quality recreation programs and facilities for the citizens of Greenville. Your completion of this survey is appreciated.

Note: Answers should reflect your entire Camp Escape experience this summer (all sessions attended).

The following are general questions related to the camp. Please read the following statements and answer appropriately.								
1. Which session(s) Camp Escape did your child attend? (Fill in all that apply)	① <small>6/21- 6/25</small>	② <small>6/28- 7/2</small>	③ <small>7/6- 7/9</small>	④ <small>7/12- 7/16</small>	⑤ <small>7/19- 7/23</small>	⑥ <small>7/26- 7/30</small>	⑦ <small>8/2- 8/6</small>	⑧ <small>8/9- 8/13</small>
2. Did you register on-line or in person? (Please circle one)	On-line				In-person			
3. Did you use the GRPD website when looking for information? (circle one)	Yes				No			
4. What age is your child? (circle one)								

The following statements concern your opinions of the program activities (i.e. trips, arts & crafts, games, etc.). Please read the statements and show how much you agree or disagree with each one by filling in the circle.	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	N/A
5. The activities were appropriate for the weekly themes.	①	②	③	④	⑤	<input type="radio"/>
6. The arts and crafts activities were appropriate for my child.	①	②	③	④	⑤	<input type="radio"/>
7. The trips were appropriate for my child.	①	②	③	④	⑤	<input type="radio"/>
8. The games were appropriate for my child.	①	②	③	④	⑤	<input type="radio"/>
9. The activities were well planned and executed.	①	②	③	④	⑤	<input type="radio"/>
Please provide additional comments that may assist us with improving the themes and activities:						

The following statements concern your opinions of the camp staff . Please read the statements and show how much you agree or disagree with each one by filling in the circle.	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	N/A
10. The camp staff performed their duties with professionalism.	①	②	③	④	⑤	<input type="radio"/>
11. The camp staff provided an example of good behavior.	①	②	③	④	⑤	<input type="radio"/>
12. The camp staff treated each participant fairly and equally.	①	②	③	④	⑤	<input type="radio"/>
13. The camp staff provided organized and clear communication of the events (program schedule, cancellations, etc.).	①	②	③	④	⑤	<input type="radio"/>
14. The camp staff was friendly at check-in and made my child feel welcomed.	①	②	③	④	⑤	<input type="radio"/>
15. The camp staff made me aware of behavior- both favorable and unfavorable.	①	②	③	④	⑤	<input type="radio"/>
Please provide additional comments that may assist us with improving our staff:						

Questions 16-20 on back >

The following statements concern your opinions of the program procedures (i.e. marketing, registration, scheduling, etc.). Please read the statements and show how much you agree or disagree with each one by filling in the circle.	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	N/A
16. Camp information was easy to understand	①	②	③	④	⑤	⊙
17. Pick-up and Drop-off was easy and convenient.	①	②	③	④	⑤	⊙
18. I felt safe leaving my child at Camp Escape.	①	②	③	④	⑤	⊙
Please provide additional comments that may assist us with improving our procedures:						

The following questions are to provide us with a greater understanding of our customers.

19. How did you hear about the program? _____

20. Will you be registering for Camp Escape again? Yes No My child will be too old

Additional comments: _____

THANK YOU FOR COMPLETING THIS SURVEY